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UNITED STATES DEPARTMENT OF AGRICULTURE
FARM SECURITY ADMINISTRATION
HEALTH SERVICES DIVISION

Activities of County, District, and State Units, July - September, 1944

Extent of program

At the end of September, 1944, the Farm Security health services program had a total of:-

808 units (plans) operating in
983 counties in
38 states, and in Puerto Rico, with
62,800 families and
327,800 persons holding membership

Résumé of membership totals as of September 30, 1944

These 808 health service plans offer varying types and combinations of medical and dental care. The following résumé shows the way in which the total membership is divided among these groups.

	<u>Units</u>	<u>Counties</u>	<u>Families</u>	<u>Persons</u>
Physicians' and surgeons' service only or in connection with other types of service	551	733	47,142	243,972
Hospital service offered separately	58	347	20,567	109,456
Physicians' and hospital service	609	1,080	67,709	353,428
Less physicians' and hospital duplications*	(44)	208	11,946	66,378
Total physicians' and hospital service	609	872	55,763	287,050
Surgical service offered separately	4	70	3,296	20,009
Physicians', hospital, and surgical service	613	942	59,059	307,059
Dental service offered separately	195	220	15,016	77,524
Physicians', hospital, surgical and dental service	808	1,162	74,075	384,583
Less dental duplications*	(153)	179	11,275	56,783
U. S. Total - (excluding dupli- cations) representing 38 states and Puerto Rico	808	983	62,800	327,800

*Duplications: In those counties which have two or more separate units offering different types of service (such as medical and hospital), the membership of the smaller unit or units has been deducted on the assumption that these same families also held membership in the larger unit.

Increase and decrease in membership

A comparison of the membership totals in the health service groups for September 30, 1944, and June 30, 1944, are shown below:

Physicians' Service

	<u>Units</u>	<u>Counties</u>	<u>Families</u>
June 30, 1944	592	782	54,546
September 30, 1944	551	733	47,142
	-41	-49	-7,404

Per cent change in membership -13.6

Surgeons' Service (Separate or with Hospital Service)

	<u>Units</u>	<u>Counties</u>	<u>Families</u>
June 30, 1944	33	145	9,780
September 30, 1944	44	246	12,699
	+11	+101	+2,919

Per cent change in membership +29.8

Hospital Service (Separate or with Surgeons' Service)

	<u>Units</u>	<u>Counties</u>	<u>Families</u>
June 30, 1944	57	319	19,450
September 30, 1944	58	347	20,567
	+1	+28	+1,117

Per cent change in membership +5.7

Separate Dental Service

	<u>Units</u>	<u>Counties</u>	<u>Families</u>
June 30, 1944	195	219	16,529
September 30, 1944	195	220	15,016
	0	-1	-1,513

Per cent change in membership -9.2

All Services (Omitting Duplications)

	<u>Units</u>	<u>Counties</u>	<u>Families</u>
June 30, 1944	849	1,012	70,598
September 30, 1944	808	983	62,800
	-41	-29	-7,598

Per cent change in membership -10.8

These figures show an increase in surgical and hospital membership, based on the family membership, and a decreased membership in physicians' and dental services and in the total membership for all services taken together. This is a continuance of the trend as it has been for several quarters, but with the decrease slightly less. The increase in membership in hospital and surgical plans follows the growing interest by the country as a whole in this type of health protection.

One element in the continued drop in membership is the severe war-time shortage of doctors. Many physicians and dentists, already overworked, feel that they cannot assume responsibility for the care of any specific group. Another important element is the drop in the number of FSA clients because of increased income which enables them to pay off or operate without FSA loans. The majority of these health plans limit their membership to FSA clients, some accept former clients, and a few will accept any farmer in the area served by the plan. These limitations in eligibility are usually incorporated into the agreements with the doctors. Table 1 shows this increase or decrease in the total membership by FSA regions and the comparable per cent change in the FSA clients for this same period.

Services Offered

It is interesting to see what per cent of the total membership is receiving the various types of service offered. The following figures give this breakdown, showing the number of families and persons eligible for the different types of care, as well as the units and counties involved.

Percentage of total membership receiving different types of health services, as of September 30, 1944

<u>Service</u>	<u>Units</u>	<u>Counties</u>	<u>Families</u>	<u>Persons</u>	<u>Per cent of total membership</u>
Physicians'	551	733	47,142	243,972	75.1
Surgeons':					
Separate	4	70	3,296	20,039	5.2
With hospital	40	176	9,403	49,641	15.0
With physicians'	121	213	11,356	55,854	43.7
Hospital:					
Separate or with surgeons'	58	347	20,567	109,456	32.8
With physicians'	257	356	24,057	123,323	38.3
Drug:					
With physicians'	162	192	16,452	87,344	26.2
Dental:					
Separate	195	220	15,016	77,524	23.9
With physicians'	62	94	6,482	32,797	10.3

The large table at the end of this report, Table 2, gives the types of plans and membership totals by FSA regions and state.

Table 1. Change in the total number of Health service units, number of counties represented and totals of families holding membership during the quarterly period July - September, 1944 for the entire United States and for each FSA region and percentage reduction in the totals of FSA active standard borrowers during the same period.

Region	June 30, 1944			September 30, 1944			Increase or decrease			Per cent change	
	Units	Counties	Families	Units	Counties	Families	Units	Counties	Families	Member - FSA	Borrowers
All Regions	849	1,012	70,398	808	983	62,800	-41	-29	-7,598	-10.8	-4.8
I	24	58	2,035	24	58	1,842	0	0	-193	-9.5	-4.5
II	4	4	278	4	4	254	0	0	-24	-8.6	-3.9
III	40	47	1,693	32	41	1,462	-8	-6	-231	-13.6	-6.1
IV	103	224	10,826	86	224	10,128	-17	0	-698	-6.4	-2.4
V	263	183	17,205	263	184	16,786	0	+1	-419	-2.4	-3.3
VI	204	152	19,031	201	146	14,549	-3	-6	-4,482	-23.6	-9.3
VII	19	56	1,568	18	53	1,455	-1	-3	-113	-7.2	-5.7
VIII	111	143	8,897	110	145	8,420	-1	+2	-477	-5.4	-4.1
IX	18	29	1,832	15	26	1,647	-3	-3	-185	-10.1	-5.9
X	22	54	3,146	14	39	2,356	-8	-15	-790	-25.1	-4.1
XI	19	26	1,427	17	25	1,204	-2	-1	-223	-15.6	-5.6
XII	21	35	2,417	21	35	2,357	0	0	-60	-2.5	-4.7
XIII	1	1	43	3	3	340	+2	+2	297	+69.1	+1.4

Services and charges reported

The FSA health plans operate, in the main, on a fee-for-service or a capitation basis. The fee-for-service plans pay for the medical, hospital, or dental care received by their members according to the usual schedule of fees prevailing in the locality. In the capitation plans each family selects the physician of its choice, and that physician is paid a set fee each month regardless of the amount of service rendered. Any plans which use a combination of these two ways of operating are classified according to the arrangement with the physicians. Few of the capitation plans require the doctor to report the amount of service rendered. Therefore, in Table 2, the information on capitation plans shows only the membership and the amount paid the physicians, hospitals, or dentists.

Per cent of membership covered by report on service and charges

In Table 3 the fee-for-service plans are listed by state and region, showing the approved charges and per cent paid, and service rates per 1,000 persons per year, for all units reporting during the quarter. The following figures show what per cent of the fee-for-service membership is covered by the charges and rates in Table 2.

	July		August		September		Average	
	Member- families reporting	Per cent reporting	Member- families reporting	Per cent reporting	Member- families reporting	Per cent reporting	Per cent reporting	Per cent reporting
Physicians' service alone or with other services	30,409	77.2	28,641	73.5	22,502	58.2	58.2	69.7
Hospital service								
separate	15,279	77.4	14,794	75.2	17,138	83.3	83.3	78.7
combined	12,575	67.2	11,132	60.1	9,581	52.0	52.0	59.8
Dental service								
separate	10,847	77.1	10,626	75.6	9,548	68.0	68.0	73.5
combined	3,535	54.9	3,364	53.0	2,507	40.5	40.5	49.6
Drug service	10,781	81.5	9,591	72.8	5,581	43.1	43.1	66.0

Analysis of volume of service rendered

In this report the usual analysis of the volume of service rendered and comparison with previous quarters, and with similar rates for the general population are omitted but will be resumed in later reports.

Two special programs listed as "non-reporting" in Table 2 are the Southeast Missouri Health Service, Inc., and the Taos County Cooperative Health Association. These two programs are operated on a basis differing so greatly from the regular FSA health program that they are not included in the table. However, reports have been received from these associations.

Taos County Cooperative Health Association: The reports for the Taos County Cooperative Health Association are incomplete for this quarter. The membership is the same as last quarter, 1,145 families and 6,103 persons. The nurses' reports indicate that there were over 2,200 visits to the physician at clinic, over 150 nurses' home visits (curtailed because of transportation problems), and over 150 hospital admissions.

Southeast Missouri Health Service, Inc.: The membership of the Southeast Missouri Health Service increased from 642 families and 3,457 persons on June 30, 1944, to 693 families and 3,819 persons on September 30, 1944. The following are the main charges and rates:

	<u>Charges (or costs)</u>	<u>Per cent payment possible</u>	<u>Charges per month per member (person)</u>	<u>Rate per 1,000 persons per month</u>
Physicians'	\$ 5,521.75	53.5	\$.50	179 calls
Surgeons' & specialists'	2,319.50	60.3	.21	5 cases
Hospital	1,542.00	100.0	.14	35 days
Drugs	419.39	100.0	.04	
Dental - mobile clinic	1,388.07	100.0		
Nursing	2,423.50	100.0		
Chronic conditions	593.00	100.0		
X-ray and diagnostic	156.50	100.0		
Administration	2,297.32	100.0		
Total	\$16,661.03			

This association receives government subsidy. In the above figures, the charges for physicians', surgeons', hospital and drug services are paid by families' fees supplemented by government funds. All other services are paid for entirely from grant funds. Fifty per cent of the charges for physicians' and surgeons' service are advanced each quarter from the funds allotted to that service, and the remaining charges paid at the end of the year on a pro-rata basis from the funds available. The hospital and drug charges are paid in full.

The rate for physicians' calls per thousand persons per month is greatly increased over last quarter, which was 140 calls per thousand persons per month. The hospital rate of 35 days per thousand persons per month is still high. The mobile dental unit, staffed by one dentist and an assistant, had 432 cases, 467 visits, and 2,327 services. The response to this opportunity for dental care has increased, and the rates are now far above those shown in Table 2 for the other FSA plans. The four nurses, trained in public health techniques, have done valuable service. As an indication of this, they report 1,065 field nursing visits, many with bedside care.

Table 2. FSA Health Services Division, July - September, 1944

Part 1. Physicians' and Surgeons' Services

Totals and rates for reporting units only

Membership as of September 30, 1944

Region and State	No. of units	No. of counties	No. of families	No. of persons	Physicians' approved charges	Per cent paid	Average monthly approved charges per person eligible for service	No. of persons months for units reporting calls	No. of physicians' and surgeons' calls per month per 1,000 persons in units reporting calls			
									Office	Home	Hospital	Total
<u>Region V (continued)</u>												
South Carolina	9	9	671	3,874	\$ 3,195.53	79.6	\$.54	5,905	217	33	2	252
b/ Cap.	1	1	98	339								
b/ Cap.	4	4	124	639	916.67 a/							
b/ Cap.	4	4	405	2,232								
<u>Region VI</u>												
Fee-for-service	122	126	12,621	66,469								
Capitation	97	100	10,295	53,588	45,476.97	71.3	.33	129,099	90	21	1	112
Arkansas	25	26	2,326	12,881	5,800.21							
b/ Cap.	13	14	4,077	20,816	21,292.12	75.3	.34	60,847	88	21	2	113
Louisiana	2	3	155	798	458.87 a/							
b/ Cap.	22	22	2,340	12,267	15,033.84 a/	72.2	.36	34,791	104	17	1	122
Mississippi	b/ 31	33	3,842	20,289	11,151.01	74.7	.28	33,461	79	18	0	97
b/ Cap.	3	3	450	2,525	5,341.34 a/							
b/ Cap.	20	20	1,721	9,558								
<u>Region VII</u>												
Fee-for-service	18	53	1,455	7,472								
Capitation	17	49	1,363	7,040	4,040.07	72.4	.37	9,960	116	5	16	137
Kansas	1	4	92	432								
Nebraska	b/ 6	22	439	2,234	1,995.52	65.7	.45	3,342	164	6	8	178
b/ Cap.	10	14	545	2,708	700.05	86.9	.29	2,438	134	8	2	143
South Dakota	b/ b/ 1	13	379	2,098	1,344.50	74.9	.32	4,180	67	3	30	100

Table 2. FSA Health Services Division, July - September, 1944

Part 1. Physicians' and Surgeons' Services

Region and State	No. of units	No. of counties	No. of families	No. of persons	Physicians' approved charges	Per cent paid	Totals and rates for reporting units only		No. of physicians' and surgeons' calls per month per 1,000 persons in units reporting calls			
							Office	Home	Hospital	Total		
Region VIII	90	101	5,772	27,537								
Fee-for-service	83	94	5,417	25,891	\$23,853.96	79.1	\$.46	52,228	108	11	9	
Capitation	7	7	355	1,616	1,032.62							
Oklahoma	14	14	1,396	6,646	8,586.32	77.9	.45	19,182	120	12	10	
Texas	b/ 7	7	587	2,854								
	33	38	2,042	9,796	15,267.64	79.8	.46	33,046	101	11	8	
	b/ 29	35	1,392	6,595								
Cap.	b/ 3	3	214	1,006	1,032.62 a/							
	b/ 4	4	141	640								
Region IX	14	24	1,490	6,238								
Fee-for-service	11	21	879	3,051								
Capitation	3	3	611	3,187								
California	b/ 10	18	651	2,011								
Utah	b/ 1	3	228	1,040								
Cap.	b/ 3	3	611	3,187								
Region X	11	26	1,847	8,772								
Fee-for-service	8	23	1,635	7,676								
Capitation	3	3	212	1,096								
Colorado	b/ 5	5	320	1,549								
Montana	b/ 3	18	1,315	6,127								
Wyoming Cap.	b/ 3	3	212	1,096								

Membership as of September 30, 1944

Table 2. FSA Health Services Division, July - September, 1944

Part 1. Physicians' and Surgeons' Services

Totals and rates for reporting units only

No. of physicians' and surgeons' calls per month per 1,000 persons in units reporting calls

Membership as of September 30, 1944

Region and State	No. of units	No. of counties	No. of families	No. of persons	Physicians' approved charges	Average monthly approved charges per person eligible for services	No. of persons months for units reporting calls	Office	Home	Hospital	Total		
Region XI	13	21	705	3,608	12,903.22	.56.9	5,333	108	17	127			
Idaho	2	5	121	597	1,329.22	.58.7	58	2,298	162	2	182		
Oregon	b/	6	9	335	1,540								
Washington	b/	1	2	36	148								
	b/	2	4	118	524	1,654.00	.55.4	.50	3,338	71	1	18	90
	b/ c/	1	1	117	536								
	b/	1	2	38	163								
Region XII	18	35	2,357	12,235									
Fee-for-service	17	34	2,322	12,060	1,093.25	.85.9	.51	2,014	76	2	11	89	
Capitation	1	1	35	175	193.75 b/								
New Mexico	2	3	68	348	667.25	100.0	.22	2,360	70	6	11	81	
Texas	b/	6	12	1,769	9,638								
	b/	2	3	38	172	426.00	.63.8	.77	554	105	9	9	123
	b/	7	16	447	1,902								
Cap.	1	1	35	175	193.75 b/								
Region XIII	3	3	340	2,008									
Fee-for-service	1	1	243	1,434									
Capitation	2	2	97	574									
Puerto Rico	b/	1	1	243	1,434								
Cap. b/	2	2	97	574									

Part 2. Hospital Service (Combined with other services)

Totals and rates for reporting units only

Days hospitalized

Membership as of September 30, 1944

Region and State	No. of units	No. of counties	No. of families	No. of persons	Hospital approved charges	Per cent paid	Average monthly approved charges per person eligible for service	Per cent of total physicians' surgeons & hospital charges	No. of persons-months for units covered	No. of days of hospitalization per 1,000 persons per month
All Regions	257	356	24,057	123,323						
Fee-for-service	216	270	18,422	94,016	\$ 14,699.85	69.3	\$.09	19.5	132,530	12
Capitation	41	86	5,635	29,307	2,908.03 a/					
Region I	2	7	346	1,364	1,089.25	100.0	.49	38.3	3,359	127
New York	1	6	295	1,136	1,089.25	100.0	.49	38.3	3,359	127
b/	1	1	51	228						
Region III	1	6	693	3,819						
Missouri	b/	1	6	693	3,819					
Region IV	18	26	646	3,723	809.80	45.9	.14	22.6	8,811	5
North Carolina b/	1	1	24	125						
Virginia	7	11	309	2,581	553.30	47.9	.14	19.5	7,145	4
West Virginia	8	10	123	644	256.50	41.6	.13	34.1	1,666	7
b/	2	4	80	373						
Region V	112	117	11,799	63,064						
Fee-for-service	82	85	7,249	39,213	6,409.92	58.1	.07	17.2	76,982	6
Capitation	30	32	4,550	23,851	2,251.95 a/					
Alabama	9	9	1,725	8,917	2,603.50	56.1	.09	18.1	23,328	8
b/	5	5	947	4,905						
Cap.	9	9	1,918	9,774	820.12 a/					
b/	5	5	1,248	6,524						
Florida	1	1	27	155	1.28	100.0	.02	4.7	300	0
Georgia	53	55	3,497	19,411	3,592.44	57.1	.06	17.9	44,767	5
b/	7	8	498	2,570						
Cap.	11	11	824	4,523	922.71 a/					
b/	1	3	109	554						
South Carolina	7	7	555	3,255	206.70	100.0	.02	7.5	8,587	4
Cap.	1	1	66	329	509.12 a/					
b/	3	3	388	2,147						

Table 2. FSA Health Services Division, July - September, 1944

Part 2. Hospital Services (Combined with other services)

Region and State	Membership as of September 30, 1944				Totals and rates for reporting units only				Days hospitalized	
	No. of units	No. of counties	No. of families	No. of persons	Hospital approved charges	per cent paid	Average monthly approved charges per person eligible for service	Per cent of total physicians', surgeons', and hospital charges	No. of person-months for units covered	No. of days of hospitalization per 1,000 persons per month
Region VI										
Fee-for-service	2	2	198	958	\$ 36.00	100.0	\$.03	10.0	1,622	0
Capitation	1	1	135	703	143.50 a/					
Arkansas Cap.	1	1	135	703	143.50 a/					
Louisiana	1	1	71	332						
Mississippi b/	1	1	127	626	36.00	100.0	.03	10.0	626	0
Region VII										
Fee-for-service	17	53	1,455	7,472	1,126.88	99.9	.10	21.8	7,144	17
Capitation	1	44	92	432	434.58 a/					
Kansas b/	6	22	439	2,234	474.42	100.0	.11	19.2	2,746	24
Nebraska b/	10	11	545	2,708	72.96	99.0	.03	9.4	2,300	2
Cap. b/	1	4	92	432	434.58 a/					
South Dakota b/	1	13	379	2,098	579.50	100.0	.14	30.1	2,098	25
Region VIII										
Fee-for-service	55	68	3,978	18,886	4,118.96	66.4	.12	18.3	26,843	16
Capitation	4	4	233	1,107	78.00 a/					
Oklahoma b/	8	8	919	4,246	1,218.81	63.3	.11	16.0	6,501	18
Texas b/	3	3	223	1,060						
Cap. b/	24	29	1,563	7,567	2,900.15	67.7	.13	19.5	20,342	15
Cap. b/	20	24	1,040	4,906						
Cap. b/	2	2	145	729	78.00 a/					
Cap. b/	2	2	88	378						
Region IX										
Fee-for-service	11	23	1,292	5,169						
Capitation	2	2	413	2,118						
California b/	10	18	651	2,011						
Utah b/	1	3	228	1,040						
Cap. b/	2	2	413	2,118						

Table 2. FSA Health Services Division, July - September, 1941

Part 2. Hospital Services (Combined with other services)

Region and State	No. of units	No. of counties	No. of families	No. of persons	Totals and rates for reporting units only			Days hospitalized	
					Hospital approved charges	Per cent paid	Average monthly approved charges per person eligible for service	Per cent of total physicians', surgeons' and hospital charges	No. of persons months for units covered
<u>Membership as of September 30, 1941</u>									
Region X	7	7	449	2,239					
Fee-for-service	4	4	237	1,143					
Capitation	3	3	212	1,096					
Colorado	b/ 4	4	237	1,143					
Wyoming	Cap. b/ 3	3	212	1,096					
Region XI	12	24	2,058	10,884					
Idaho	2	3	121	694	175.59	.13	.21	.22	205
Oregon	b/ 6	9	335	1,540					
Washington	b/ 1	2	36	148					
	3	5	235	1,060	552.95	100.0	.18	71.5	3,129
	b/ 1	2	38	163					23
Region XII	10	24	2,058	10,884					
Fee-for-service	1	2	31	138	62.50	100.0	.03	7.4	2,342
Capitation	9	22	2,027	10,746					
New Mexico	b/ 5	12	769	3,845	62.50	100.0	.03	7.5	1,229
Texas	b/ 3	10	258	1,108					6
Region XIII		1	213	1,431					
Puerto Rico	b/ 1	1	213	1,431					

Table 2. FSA Health Services Division, July - September, 1944.

Part 3. Separate Hospital Service and Surgical Service

Region and State	No. of units	No. of counties	No. of families	No. of persons	Hospital approved charges	Days hospitalized			Surgical service - separate or with hospitalization		Surgeons' - specialists' approved charges	Per cent paid	Charges per person eligible for service
						per month	per person eligible for service	No. of days of hospitalization per 1,000 persons per month	Average monthly approved charges per person eligible for service				
All Regions	58	317	30,467	119,166	\$81,176.46	67.1	.11	209,666	25	\$13,552.05	71.1	.08	
Region I	7	7	307	1,571	578.40	100.0	.24	2,120	50				
New York	2	2	151	663	578.40	100.0	.24	2,120	50				
Pennsylvania	b/ 3	3	155	638									
Region IV	1	105	8,770	50,903	15,297.58	100.0	.12	131,829	26	\$110,75	100.0	.06	
North Carolina	2	98	5,992	35,172	12,877.29	100.0	.12	105,061	28	\$230.75	100.0	.06	
Tennessee	1	16	970	5,170	1,205.40	100.0	.08	15,504	19	1,066.50	100.0	.07	
Virginia	2	78	1,789	10,261	1,215.00	100.0	.12	10,263	26	2,152.50	100.0	.07	
Region V	7	7	1,011	5,609	529.10	76.6	.03	3,110	43				
Alabama	1	1	241	1,446	d/	d/	d/	d/	d/				
Georgia	b/ 1	1	230	1,060									
South Carolina	1	1	126	694	d/	d/	d/	d/	d/				
Region VI	22	62	2,321	27,352	7,137.55	92.7	.10	7,361	22				
Arkansas	21	48	1,004	20,640	5,157.75	100.0	.36	36,081	23	1,045.50	122.1	.10	
Mississippi	b/ 5	5	335	1,627									
Region VIII	7	11	988	5,192	1,280.50	97.4	.10	13,055	27	776.50	100.0	.11	
Oklahoma	2	24	2,401	11,110	1,123.55	100.0	.11	d/	d/	200.50	100.0	.11	
Texas	b/ 2	26	1,250	6,124	2,010.00	100.0	.08	d/	d/	200.50	100.0	.11	
Region X	b/ 13	17	2,577	12,573									
Colorado	b/ 1	1	371	2,677									
Montana	b/ 1	5	96	322									
Region XI	1	1	73	1,238									
Oregon	b/ 1	1	53	2,057									

Membership as of September 30, 1944

Totals and rates for reporting units only

Table 1. Summary of Enrollment, Membership, and Charges

Part 4. Drug Service

Totals and rates for reporting units only

Membership as of September 30, 1944

Region and State	No. of units	No. of counties	No. of families	No. of persons	Drugists' approved charges	Per cent paid	Approved monthly charges per person eligible for service	Per cent of total physicians' and drugists' charges
All Regions	162	192	16,452	87,311				
Fee-for-service	136	158	12,956	69,015	\$ 9,522.33	.7	17.5	
Capitation	32	34	3,496	18,329	984.12 a/			
Region I	1	1	11	70				
Maryland	1	1	11	70				
Region IV	4	5	68	331				
Fee-for-service	3	4	56	267	0	0	0	0
Capitation	1	1	12	64				
Kentucky	1	1	14	78	0	0	0	0
Cap.	1	1	12	64				
Tennessee	1	1	17	85	0	0	0	0
West Virginia	1	2	25	104	0	0	0	0
Region V	93	95	8,539	45,911				
Fee-for-service	68	69	5,669	30,919	6,002.41	79.7	.08	18.7
Capitation	25	26	2,870	14,992	1,380.24	67.5	.13	18.7
Alabama	b/	3	712	3,626				
Cap.	b/	7	664	3,561	259.42 a/			
Georgia	b/	1	60	313				
Cap.	b/	5	2,849	15,731	1,174.10	73.7	.17	18.2
South Carolina	b/	5	300	1,443				
Cap.	b/	8	667	3,690	351.66 a/			
Georgia	b/	1	109	554				
Cap.	b/	3	671	3,874	1,075.28	83.7	.18	25.2
South Carolina	b/	1	98	530				
Cap.	b/	4	124	639	184.34 a/			
Georgia	b/	4	405	2,232				

Table 2. WPA Health Services Division, July - September 1944

Part 4. Drug Service

Totals and rates for reporting units only

Membership as of September 30, 1944

Region and State	No. of units	No. of counties	No. of families	No. of persons	Drugists' approved charges	Per cent paid	Approved monthly charges per person eligible for service	Per cent of total physicians' and drugists' charges
Region VI	20	27	3,000	18,584				
Fee-for-service*	24	25	3,108	16,348	\$ 2,380.34	80.0	\$.07	19.3
Capitation	2	2	398	2,236	0			
Arkansas	2	2	327	1,600	92.58	78.6	.02	5.9
Mississippi	b/ 22	23	2,781	14,660	2,287.76	80.0	.08	22.0
Cap.	2	2	398	2,236	0			
Region VII	14	27	1,119	2,923	506.14	56.4	.06	14.9
Kansas	b/ 4	4	399	1,509	261.94	50.4	.03	14.4
Nebraska	b/ 9	10	470	2,326	198.50	100.0	.10	26.5
South Dakota	b/ 1	13	379	2,098	145.70	87.9	.03	9.3
Region VIII	9	0	497	2,278				
Fee-for-service	8	8	428	2,001	192.95	100.0	.04	8.4
Capitation	1	1	69	277	149.45 a/			
Oklahoma	3	3	200	982	89.99	100.0	.04	9.2
Texas	b/ 2	2	42	196				
	2	2	157	707	102.96	100.0	.04	7.8
Cap.	b/ 1	1	29	116				
	1	1	69	277	149.45 a/			
Region IX	2	2	228	1,040				
Utah	b/ 1	1	20	1,040				
Region X	1	1	25	1,000				
Capitation	1	1	55	266				
Wyoming	Cap. b/ 1	1	58	265				
Region XI	5	9	309	1,425	200.02	100.0	.04	6.5
Idaho	1	2	36	202	80.72	100.0	.04	6.1
Washington	3	5	235	1,060	119.30	100.0	.04	6.7
	b/ 1	2	38	163				

Table 2. FSA Health Services Division, July - September, 1944

Part 4. Drug ServiceTotals and rates for reporting units onlyMembership as of September 30, 1944

Region and State	No. of units	No. of counties	No. of families	No. of persons	Druggists' approved charges	Per cent paid	Approved monthly charges per person eligible for service	Per cent of total physicians' and druggists' charges
Region XII	6	12	1,790	9,753	140.47	100.0	.07	26.9
Fee-for-service	5	11	1,755	9,578	38.75 a/			
Capitation	1	1	35	175	140.47	100.0	.07	26.9
New Mexico	b/	11	1,755	9,578	38.75 a/			
Texas Cap.	1	1	35	175				
Region XIII	2	2	297	1,753				
Fee-for-service	1	1	243	1,434				
Capitation	1	1	54	319				
Puerto Rico	b/	1	213	1,434				
Cap.	b/	1	54	319				

Table 2. FSA Health Services Division, July - September, 1944

Part 5. Dental Service (Combined with other services)

Totals and rates for reporting units only

Membership as of September 30, 1944

Region and State	No. of units	No. of counties	No. of families	No. of persons	Dentists' approved charges	Per cent paid	Average monthly approved charges per person eligible for service	No. of person-months for units reporting persons served	No. of persons served per 1,000 persons per month	
All Regions	62	94	6,482	32,797						
Fee-for-service	57	89	6,184	31,272	\$ 1,574.66	83.4	\$.04	32,113	7	
Capitation	5	5	298	1,525	100.50 a/					
Region III	2	9	762	1,088	57.00	100.0	.07	807	10	
Missouri	b/	1	6	693	3,819					
Ohio	1	3	69	269	57.00	100.0	.07	807	10	
Region IV	4	11	134	688	122.00	62.5	.05	1,075	11	
Tennessee	3	5	75	358	0	0	0	0	0	
Virginia	1	6	59	330	122.00	62.5	.11	1,075	11	
Region V	2	3	559	2,522	18.50	100.0	.004	2,714.8	5	
Alabama	1	2	116	1,706	0	0	0	0	0	
Georgia	1	1	143	816	18.50	100.0	.01	2,714.8	5	
Region VI	1	1	145	151	0	0	0	0	0	
Louisiana	1	1	145	151	0	0	0	0	0	
Region VII	12	26	993	5,183	71.50	99.9	.01	6,860	3	
Kansas	b/	3	3	194	1,009	7.00	100.0	.004	1,630	2
Nebraska	b/	8	10	420	2,076	18.50	99.7	.01	1,050	7
South Dakota	b/	1	13	379	2,098	46.00	100.0	.01	1,180	3
Region VIII	37	40	2,392	11,500						
Fee-for-service	33	36	2,218	10,608	1,299.00	83.4	.06	20,923	8	
Capitation	4	4	174	892	100.50 a/					
Oklahoma	5	5	716	3,317	368.50	78.2	.03	10,703	5	
Texas	b/	3	3	125	649					
		15	18	899	4,251	930.50	85.5	10,220	10	
	b/	10	10	478	2,391					
Cap.	b/	2	2	145	729	100.50 a/				
	b/	2	2	29	163					

Table 2. FSA Health Services Division, July - September, 1944

Part 5. Dental Service (Combined with other services)

Totals and rates for reporting units only

Membership as of September 30, 1944

Region and State	No. of units	No. of accounts	No. of families	No. of persons	Dentists' approved charges	Per cent paid	Average monthly approved charges per person eligible for service	No. of person-months for units reporting persons served	No. of persons served per 1,000 persons per month
Region X	1	1	124	633					
Capitation	1	1	124	633					
Wyoming Cap. b/	1	1	124	633					
Region XI	1	1	85	495	\$6.66	100.0	\$.00+	a/	a/
Idaho	1	1	85	495	6.66	100.0	.00+	a/	a/
Region XII	1	1	1,145	6,103					
New Mexico	b/	1	1,145	6,103					
Region XIII	1	1	243	1,434					
Puerto Rico	b/	1	243	1,434					

Table 2. FSA Health Service Division, July - September, 1944

Part 6. Separate Dental Service

Totals and rates for reporting units only

Membership as of September 30, 1944

Region and State	No. of units	No. of counties	No. of families	No. of persons	Dentists' approved charges	Per cent paid	Average monthly approved charges per person eligible for service	No. of person-months for units reporting persons served	No. of persons served per 1,000 persons per month
All Regions	195	220	15,016	77,521					
Fee-for-service	181	199	14,050	72,254	\$10,998.59	91.0	\$.07	136,322	18
Capitation	b/	21	266	5,270	248.80 a/				
Region II	2	2	23	110	0				
Michigan	1	1	20	101	0				
b/	1	1	3	9					
Region IV	4	4	221	1,260	43.23	94.0	.01	1,011	11
North Carolina	b/	2	2	49	283				
Virginia	1	1	121	641	43.23	94.8	.01	1,011	11
b/	1	1	51	336					
Region V	119	131	9,995	52,760					
Fee-for-service	107	112	9,139	48,146	7,678.18	90.4	.07	102,688	18
Capitation	12	19	856	4,614	133.34 a/				
Alabama	21	21	3,199	16,411	3,461.89	93.6	.08	42,519	22
b/	9	9	1,291	6,530					
Cap.	b/	1	1	82	468	133.34 a/			
b/	2	2	481	2,604					
Georgia	48	52	2,872	15,455	3,348.14	87.5	.07	45,271	15
b/	12	13	415	2,326					
Cap.	b/	6	13	227	1,175	0			
b/	2	2	48	290					
South Carolina	13	13	1,018	5,584	868.15	89.0	.05	15,018	16
b/	4	4	344	1,840					
Cap.	b/	1	1	18	77				

Table 2. FSA Health Service Division, July - September, 1941

Part 6. Separate Dental Service

Totals and rates for reporting units only

Membership as of September 30, 1941

Region and State	No. of units	No. of counties	No. of families	No. of persons	Dentists' approved charges	Per cent paid	Average monthly approved charges per person eligible for service	No. of person-months for units reporting persons served	No. of persons served per 1,000 persons per month
Region VI	46	17	3,202	15,216					
Fee-for-service	44	45	3,092	15,560	\$ 2,915.30	92.1	.09	26,905	21
Capitation	2	2	110	656	115.46 a/				
Arkansas	27	27	1,372	6,759	1,985.40	93.3	.10	15,041	22
b/	2	2	65	326					
Louisiana	2	2	117	566	166.00	99.6	.10	1,698	34
Mississippi	2	3	167	905	763.90	87.3	.06	10,166	17
b/	11	11	1,371	7,004					
Cap.	b/	2	2	656	115.46 a/				
Region VIII	13	13	3,222	14,480	249.50	91.1	.05	4,460	2
Oklahoma	1	1	73	365	57.00	96.5	.08	730	12
Texas	5	6	238	1,148	192.50	89.5	.05	3,838	8
b/	10	12	571	2,578					
Region IX	1	2	157	894					
Utah	b/	1	2	157	894				
Region X	1	1	5	22					
Colorado	b/	1	1	5	22				
Region XI	3	3	131	517					
Idaho	b/	1	1	35	179				
Washington	b/	2	2	96	338				
Region XII	3	11	400	1,656	112.38	100.0	.04	1,150	7
New Mexico	1	7	320	1,352	141.88	100.0	.03	d/	d/
Texas	1	2	31	138	67.50	100.0	.06	1,150	7
b/	1	2	49	166					

Table 2. FSA Health Services Division, July - September, 1944

Footnotes

- a/ Payments rather than charges for units operating on a Capitation basis.
- b/ Membership totals for these units have been taken from reports for months other than September.
- c/ These units make an advanced payment, usually fifty per cent, on charges at the end of each month or quarter, delaying further payment until the end of their fiscal year. The entry under Per cent paid for these units is the estimated percentage which could be paid if all funds available for payment of bills this period were distributed.
- d/ Information incomplete.

Medical Units

July - September, 1944

Newly Reported

Region III

Ohio:

Champaign and Union County
added to Logan unit

Region IV

Tennessee:

Hickman added to Lewis-
Perry unit

Virginia:

Grayson and Wythe added
to Smyth unit

Region V

Georgia:

Bacon County added to
Brantley-Pierce-Ware unit

Region XIII

Puerto Rico:

Carolina County
Humacao County

Discontinued

Region III

Illinois:

Brown County
Fayette County
Wayne County

Missouri:

Livingston County
Madison County
Ripley County

Ohio:

Athens County
Warren County

Region IV

Kentucky:

Knox County
Laurel County
Olio County

Tennessee:

Cheatham County
Fentress County
Humphrey County
Van Buren-White County
Coverton County
Morgan County

Virginia:

Caroline dropped as separate
unit, added to King George,
Stafford, Spotsylvania
Greene-Madison-Page-Rappahannock-
Rockingham
Alleghany-Bath dropped as medical
unit, becomes hospital-surgical
plan
Grayson County
Culpeper County
Accomac County
Northampton County

Region VI

Louisiana:

Avoyelles Parish
Morehouse Parish
Concordia Parish

Mississippi:

Tippah County

Region VII

Kansas:

Shawnee-Wabaunsee Counties

Medical Units (Continued)

July - September, 1944

Discontinued

Region VIII

Texas:

Hopkins-Franklin Counties
Brazos County

Region IX

Arizona:

Maricopa County
Maricopa (Casa Grande)

Utah:

Duchesne-Uintah Counties

Region X

Colorado:

El Paso-Elbert-Teller Counties
Custer-Fremont Counties
Sedgwick County
Yuma County
Bent County

Montana:

Wyoming:

Region XI
Oregon:

Blaine County

Uintah-Sweetwater-Sublette-
Daggett (Utah) Counties
Big Horn County

Malheur County

Surgical Units

July - September, 1944

Newly Reported

Region IV

North Carolina: Medical Services Assn:

Davidson
Randolph
Forsythe
Nash
Polk
Wilson
Yadkin
Alamance

Discontinued

Region IV

North Carolina: Person County discontinued
as separate unit, joins Medical Services
Assn.

Dental Units

July - September, 1944

Newly Reported

Region V

Georgia:

Bacon added to Brantley,
Pierce, Ware Counties

Region VIII

Texas:

Rusk County listed as separate
dental unit, formerly part of
medical unit

Discontinued

Region XI

Oregon:

Malheur County

Hospital Units

Newly Reported

Region IV

North Carolina: Hospital Care:
Clay County

Virginia:

Farmers' Health:

Alleghany

Bath

Bedford

Buchanan

Dickenson

Pittsylvania

Pulaski

Russell

Scott

Tazewell

Appomattox

Chesterfield

Dinwiddie

Hanover

Lunenburg

Amerherst

Prince William

Nottoway

Region VI

Arkansas:

Lawrence County

Region VIII

Oklahoma:

Group Hospital Service:

Beckham

Greer

Kingfisher

Major

Pawnee

Stephens

Wagoner

Woods

